PTO/SB/07 (08-03)

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Application Number Filing Date **MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET** Applicant(s) Substitute for Form PTO-1360 Jeffrey J. DeGroot et al. (For use with Form PTO/SB/06) \* May be used for additional claims or amendments CLAIMS AS FILED AFTER FIRST AFTER SECOND AMENDMENT AMENDMENT Indep Indep Depend Depend Indep Depend Indep Depend Indep Depend Indep | Depend CANCELED 51 102 Ind. 52 102 53 104 54 55 <u> 104</u> 56 <u> 10</u>6 104 107 57 08 Ind. 58 Î () 9 10859 109 60 110 110 <u> 111</u> 61 I12 110 62 CANCELED 113 63 CANCELED CANCELED 114 64 I 15 65 CANCELED CANCELED CANCELED 1 16 66 67 117 118 68 CANCELED 69 19 CANCELED CANCELED CANCELED CANCELED 70 20 <u>121</u> 71 72 22 1 23 73 CANCELED CANCELED CANCELED 74 1 24 25 75 26 76 CANCELED CANCELED CANCELED 77 27 1 28 78 I 29 79 I 30 CANCELED 80 CANCELED CANCELED CANCELED 81 1 31 32 82 83 33 CANCELED 84 34 CANCELED CANCELED CANCELED 35 85 36 86 37 87 88 38 39 89 40 90 91 41 42 92 43 93 44 94 45 95 46 96 47 97 98 48 49 99 50 100 Total Total 4 Indep Indep Total Total 51 Depend Depend Total Total 55

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Claims

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